

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

| | |
|---|--|
| 1. File Number U - <u>78087</u> | 2. Fiscal Year Covered From: <u>AMENDED</u> <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u> |
| 3. Name and address of person filing. Name <u>Grant</u> <u>G</u> <u>Mitchell</u> P.O. Box, Bldg., Room No., if any <u>Suite 120</u> Street <u>297 N. Marengo Avenue</u> City <u>Pasadena</u> State <u>California</u> ZIP Code + 4 <u>91101</u> | 4. Name, file number, and address of labor organization. Name <u>Painters AFL-CIO DC 36</u> Labor Organization File Number <u>030-396</u> P.O. Box, Building and Room Number, if any <u>Suite 120</u> Street <u>297 N. Marengo Avenue</u> City <u>Pasadena</u> State <u>California</u> ZIP Code + 4 <u>91101</u> |
| 5. Position in labor organization. <u>Business Manager & Sec. Treasurer</u> | |

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

| | |
|---|--|
| A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. | |
| 6. Name and address of Employer (including trade name, if any). Name <u>Robison-Prezioso</u> Trade Name, if any: _____ P.O. Box, Bldg., Room No., if any: _____ Street <u>10114 Shoemaker Avenue</u> City <u>Santa Fe Springs</u> State <u>California</u> ZIP Code + 4 <u>90670</u> | 7.a. Nature of Interest, Transaction, or Income. <u>Two bottles of wine for Christmas.</u> 7.b. Amount. <u>\$40</u> |

Signature

| | | |
|--|------------------------------|---|
| 15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.) | | |
| Signed <u>[Signature]</u> | On <u>08/22/2005</u> Date | <u>(626) 584-9925</u> Telephone Number |

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

| | |
|---------------|------|
| 12.b. Amount. | \$70 |
|---------------|------|

14.b. Amount of payment.

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name SCDF Labor Management Cooperation Committee

Trade Name, if any: So Cal Drywall Finishers LMCC

P.O. Box, Bldg., Room No., if any Suite 103

Street 297 N. Marengo Avenue

City Pasadena

State California ZIP Code + 4 91101

9. Business deals with:

☐ a. Labor Organization☐ b. Trust☒ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Western Wall & Ceiling Contractors Assoc.

Trade Name, if any: WWCCA

P.O. Box, Bldg., Room No., if any

Street 2286 N. State College Blvd.

City Fullerton

State California ZIP Code + 4 92831

11.a. Nature of such dealing.

The LMCC is a jointly administered labor and management fund established under the terms of the Collective Bargaining Agreement. The LMCC arbitrates disputes and issues interpretations of the Agreement.

11.b. Approximate dollar value of such dealing.

\$0

12.a. Nature of interest held or income received.

Two tickets to the WWCCA annual golf event Labor-Management dinner on April 29, 2004.

12.b. Amount.

\$298

Name of Person Filing Grant Mitchell

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name SCDF Labor Management Cooperation Committee

Trade Name, if any: So Cal Drywall Finishers LMCC

P.O. Box, Bldg., Room No., if any Suite 103

Street 297 N. Marengo Avenue

City Pasadena

State California ZIP Code + 4 90010

9. Business deals with:

☐ a. Labor Organization☐ b. Trust☒ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Western Wall & Ceiling Contractors Assoc

Trade Name, if any: WWCCA

P.O. Box, Bldg., Room No., if any

Street 2286 N. State College Blvd.

City Fullerton

State California ZIP Code + 4 92831

11.a. Nature of such dealing.

The LMCC is a jointly administered labor and management fund established under the terms of the Collective Bargaining Agreement. The LMCC arbitrates disputes and issues interpretations of the Agreement.

11.b. Approximate dollar value of such dealing.

\$0

12.a. Nature of interest held or income received.

WWCCA annual golf event April 29 through May 1, 2004; including golf and hotel.

12.b. Amount.

\$1,085

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name SCDF Labor Management Cooperation Committee

Trade Name, if any: So Cal Drywall Finishers LMCC

P.O. Box, Bldg., Room No., if any Suite 103

Street 297 N. Marengo Avenue

City Pasadena

State California ZIP Code + 4 91101

9. Business deals with:

☐ a. Labor Organization☐ b. Trust☒ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Western Wall & Ceiling Contractors Assoc

Trade Name, if any: WWCCA

P.O. Box, Bldg., Room No., if any

Street 2286 N. State College Blvd.

City Fullerton

State California ZIP Code + 4 92831

11.a. Nature of such dealing.

The LMCC is a jointly administered labor and management fund established under the terms of the Collective Bargaining Agreement. The LMCC arbitrates disputes and issues interpretations of the Agreement.

11.b. Approximate dollar value of such dealing.

\$0

12.a. Nature of interest held or income received.

Two tickets and hotel room for the WWCCA holiday dinner on December 11, 2004.

12.b. Amount.

\$322

Name of Person Filing Grant Mitchell

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Miller, Kaplan, Arase & Co.

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 4123 Lankershim Blvd.

City North Hollywood

State California ZIP Code + 4 91602-2828

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

11.a. Nature of such dealing.

They are the C.P.A. for the District Council.

11.b. Approximate dollar value of such dealing.

\$10,100

12.a. Nature of interest held or income received.

A bottle of whiskey for Christmas

12.b. Amount.

\$40

Name of Person Filing Grant Mitchell

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name IUPAT Labor Mangmnt Cooperation Initiative

Trade Name, if any: IUPAT LMCI

P.O. Box, Bldg., Room No., if any

Street 1750 New York Ave., N.W.

City Washington

State District of Columbia ZIP Code + 4 20006

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

The LMCI, a department of the International, is a jointly administered labor and management fund which promotes advancement of the Industry.

11.b. Approximate dollar value of such dealing.

\$0

12.a. Nature of interest held or income received.

Dinner at the IUPAT General Convention on August 18, 2004

12.b. Amount.

\$93

Grant G. Mitchell
Reporting period ending December 31, 2004

DISCLAIMER

The transactions, dealings and interests that are detailed in the attached Form LM-30 represent my good faith effort to reconstruct the reportable occurrences for the periods of January 1, 2004 to December 31, 2004. Accurate records of reportable occurrences were not kept for the 2004 fiscal year, and some or many items may have been unintentionally omitted. If, in the future, it comes to my attention that there exists a transaction, dealing, or interest that should have been reported for the period of January 1, 2004 to December 31, 2004, I will file an amended Form LM-30.